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CONFIRMATION NO. 5465

<b>SERIAL NUMBER</b> 10/526,851	<b>FILING OR 371(c) DATE</b> 05/19/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> <del>1614</del> 1626	<b>ATTORNEY DOCKET NO.</b> 234590
<b>APPLICANTS</b> Alan P. Kozikowski, Chicago, IL; Phillip Denis, Ellicott City, MD; Haiying Sun, Ann Arbor, MI; John Brognard, Carlsbad, CA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/27607 09/03/2003 which claims benefit of 60/407,239 09/03/2002 <i>JMN</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>JMN</i> Initials		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 55
			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> 45733				
<b>TITLE</b> Akt inhibitors, pharmaceutical compositions, and uses thereof				
<b>FILING FEE RECEIVED</b> 2780	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	